SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 68 OF Use separate schedule(s) (check only one)

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	information copied from such Reports and Star commercial purposes, other than using the			erson for the purpose of soliciting contributions to solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) Republican Party of Florida			
A. M	ull Name (Last, First, Middle Initial) Joseph Scheller lailing Address 1 N. Breakers Row, Apt. 351 ity Palm Beach EC ID number of contributing ederal political committee. ame of Employer //a eccipt For: Primary General Other (specify) ▼	State FL C Occupation Retired Aggregate	Zip Code 33480-4014 Year-to-Date ▼ 2500.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
B. \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	ull Name (Last, First, Middle Initial) Nilliam Schickler lailing Address 3978 Lyndhurst Court ity sarasota EC ID number of contributing ederal political committee. ame of Employer (a eceipt For: Primary General Other (specify) ▼	State FL Occupation Retired Aggregate	Zip Code 34235-2412 Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C N C F fe	ull Name (Last, First, Middle Initial) Robert Schneebeck lailing Address 741 N. Manasota Key Road ity Englewood EC ID number of contributing ederal political committee. ame of Employer ctrategic Program Management eceipt For: Primary General Other (specify)	State FL C Occupation Insurance Aggregate	Zip Code 34223-9758 Year-to-Date ▼	Date of Receipt M
SU	BTOTAL of Receipts This Page (optional)		·····	950.00
TO:	TAL This Period (last page this line number o	nlv)		